



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
BREATH ALCOHOL PROGRAM

DATAMASTER MAINTENANCE REPORT

REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN 202004	NAME OF AGENCY MSHP - D	DATE OF INSPECTION 03-17-2013
LOCATION OF INSTRUMENT (STREET AND CITY) GREENE COUNTY JAIL 1000 N. BOONEVILLE AVE, SPRINGFIELD, MO, 65802		TIME OF INSPECTION 1724

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (from printout) **03-17-2013 1724**

☒ COMPUTER

☒ DETECTOR

☒ PROGRAM

☒ FILTERS

☒ HEATERS SAMPLE CHAMBER **50** °C

☒ QUARTZ STANDARD

☒ FLOW DETECTOR

☒ CALIBRATION

☒ PUMP HIGH SPEED

☒ PRINTER

☒ INDICATOR LIGHTS

☒ SIMULATOR SOLUTION SUPPLIER **REPCO MARKETING INCLOT # 12002** EXP. DATE **08-29-2014**

☒ SIMULATOR TEMP (34°C ± 0.2°C) **34.1** °C SIMULATOR SN **G11044** EXP. DATE **09-24-2013**

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 **0.097**

TEST 2 **0.098**

TEST 3 **0.098**

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS 5	(0-.04) 0	(.05-.09) 0	(.10-.14) 0	(.15-.19) 3	OVER .19 0
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS
(USE OTHER SIDE IF NECESSARY).

0.10 SOLUTION

MEETS MDHSS REQUIREMENTS

INSPECTING OFFICER

SIGNATURE K. D. Walters	PRINT FULL NAME K. D. WALTERS
TYPE II PERMIT NUMBER/EXPIRATION DATE 220081 03-23-2014	TELEPHONE NUMBER (417) 895-6868

RETURN COMPLETED REPORT TO THE: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Blvd.
Poplar Bluff, MO 63901

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 12002

EXPIRATION DATE: August 29, 2014 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 12002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1209 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is August 30, 2012
The expiration date for this lot number is August 29, 2014 at
11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President
RepCo Marketing, Inc.

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 202004
03/17/13
17:24

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM (04-07-2009): OKAY
HEATERS
SAMPLE CHAMBER: 50c
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
--- QUARTZ STANDARD: OKAY
--- CALIBRATION: OKAY

PRINTER TEST
!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGHIJ
KLMNOPQRSTUVWXYZ[\]^_`abcde-fghijklmno
pqrstuvwxyz{|}~

Operator Signature *Mr. K. P. Walters* 674

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 202004
03/17/13

TESTING OFFICER:
WALTERS/K/D
OFFICER I.D.: 674
PERMIT NUMBER: 220081
EXPIRATION DATE: 03/23/14
MISCELLANEOUS DATA:
MONTHLY MAINTENANCE

--- SUPERVISOR NONE ---

BLANK TEST	.000	17:33
INTERNAL STANDARD	VERIFIED	17:33
EXTERNAL STANDARD	.097	17:33
BLANK TEST	.000	17:34
EXTERNAL STANDARD	.098	17:35
BLANK TEST	.000	17:35
EXTERNAL STANDARD	.098	17:36
BLANK TEST	.000	17:36

--- N = 3
--- SIM. = .1
--- AVG. = .0976

Operator Signature *Mr. K. P. Walters* 674

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 200004
03/17/13

ARREST TIME: 17:00

SUBJECT NAME:

DOE/J/J

DOB: 11/11/11

SEX: M

STATE/D.L.: MO/123456789

ARRESTING OFFICER:

WALTERS/K/D

OFFICER I.D.: 674

TESTING OFFICER:

SAME

OFFICER I.D.: 674

PERMIT NUMBER: 200081

EXPIRATION DATE: 03/23/14

MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST

.000

17:30

INTERNAL STANDARD

VERIFIED

17:30

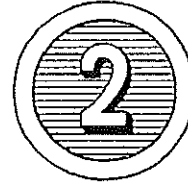
RADIO INTERFERENCE

Operator Signature Cap. K. Walters 674

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



KENNETH D WALTERS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 03/23/2012

Number 220081

Expires 03/23/2014

MO 580-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)